

Outpatient Fee Schedule Project Reference Tables

TABLE #	TABLE DESCRIPTION	HOW USED IN RELATION TO THE OUTPATIENT HOSPITAL FEE SCHEDULE PROJECT	FREQUENCY OF UPDATES	AUTOMATED AT THIS TIME?	EXISTING OR NEW TABLE
PR050	PROVIDER RATE SCHEDULES	PROVIDES HOSPITAL PEER GROUP MODIFIER %'S BY HCPCS/CPT RANGE TO BE UTILIZED WHEN CALCULATING FINAL ALLOWED AMOUNTS FOR SERVICES PAID UNDER THE OUTPATIENT HOSPITAL FEE SCHEDULE.	Generally Annually	No	Existing - end dating of old values and addition of new values
RF618	PROVIDER TYPE RATE*	PROVIDES THE DEFAULT COST TO CHARGE RATIO TO BE UTILIZED ON AN OUTPATIENT HOSPITAL CLAIM OR ENCOUNTER WHEN A CAPPED FEE IS NOT FOUND FOR A HCPCS/CPT OR IF A HCPCS/CPT IS NOT PRESENT.	Infrequently, as Rates are Rebased	No	Existing - end dating of old values and addition of new values
RF615	ENTITY TYPE/RATE SCHEDULE	ESTABLISHES THE VALID RELATIONSHIPS AND CODE VALUES WHICH CAN BE USED ON REFERENCE AND PROVIDER TABLES RELATED TO RATES. MUST BE SET UP PRIOR TO ADDING NEW OUTPATIENT HOSPITAL FEE SCHEDULE VALUES TO PR050, RF618 AND RF756.	As Needed; Infrequently	No	Existing - addition of new values
RF756	PAYMENT 1	A TABLE OF VALUES USED TO DEFINE THE ALLOWED AMOUNT CALCULATION ON AN ENCOUNTER.	As Needed; Infrequently	No	Existing - addition of new values
RF123	PROCEDURE AHCCCS COVERAGE**	PROVIDES COVERAGE INFORMATION FOR HCPCS/CPT CODES BILLED ON OUTPATIENT HOSPITAL CLAIMS AND ENCOUNTERS.	As Needed; Infrequently	No	New - Equal table exists for 1500's

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RF773	REVENUE CODES TO PROCEDURE CODES	PROVIDES A LISTING OF HCPCS/CPT THAT CAN BE REPORTED FOR A REVENUE CODE.	Evaluated annually for new procedures and updated accordingly; During initial implementation may be updated more frequently	No	Existing - end dating of old values and addition of new values
RF774	REVENUE CODES TO BILL TYPES	ESTABLISHES RELATIONSHIPS BETWEEN REVENUE CODES AND TYPE OF BILL THAT THEY CAN BE UTILIZED ON, AND FOR OUTPATIENT CLAIMS AND ENCOUNTERS FLAGS THOSE REVENUE CODES WHICH REQUIRE AND/OR ALLOW REPORTING OF HCPCS/CPT CODES.	Evaluated annually for new procedures and updated accordingly; During initial implementation may be updated more frequently	No	Existing - end dating of old values and addition of new values
RF121	VALID OPFS PROCEDURE MODIFIERS	PROVIDES HOSPITAL PEER GROUP MODIFIER %'S BY HCPCS/CPT RANGE TO BE UTILIZED WHEN CALCULATING FINAL ALLOWED AMOUNTS FOR SERVICES PAID UNDER THE OUTPATIENT HOSPITAL FEE SCHEDULE.	Evaluated annually for new procedures and updated accordingly	No	New - Equal table exists for 1500's
RF126	PROCEDURE OPFS PRICE	PROVIDES FEE'S BY HCPCS/CPT CODE BILLED ON AN OUTPATIENT HOSPITAL CLAIM OR ENCOUNTER. IF A CAPPED FEE IS NOT FOUND DEFAULT TO SCO.	Generally Annually	Yes	New - Equal table exists for 1500's
RF127	PROCEDURE OPFS CODES INDICATORS AND VALUES	PROVIDES SPECIFIC SERVICE LIMITATION INFORMATION BY HCPCS/CPT CODE WHEN BILLED ON OUTPATIENT HOSPITAL CLAIMS AND ENCOUNTERS.	Evaluated annually for new procedures and updated accordingly	No	New - Equal table exists for 1500's

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RF128	CCI EDITS	ESTABLISHES RELATIONSHIPS BETWEEN HCPCS/CPT CODES FOR PURPOSES OF BUNDLING AND UNBUNDLING OF SERVICES WHEN BILLED ON AN OUTPATIENT HOSPITAL CLAIM OR ENCOUNTER.	Monthly or bi-monthly.	Yes	New - Equal table exists for 1500's
RF723	LIMIT OVERRIDE MODIFIERS	PROVIDES A LIST OF MODIFIERS WHICH WHEN BILLED ON ANY APPLICABLE HCPCS/CPT ON AN OUTPATIENT HOSPITAL CLAIM OR ENCOUNTER, REQUIRE EXCEPTION PROCESSING (SUCH AS OVERRIDE OF SERVICE LIMITS) AS DEFINED BY THE ACTION CODE.	Evaluated annually; updated as needed; Infrequently	No	New
RF725	OVERRIDE MODIFIER ACTION CODES	A TABLE OF VALUES USED TO DEFINE OVERRIDE SITUATIONS ON RF723 AND RF739.	Evaluated annually; updated as needed; Infrequently	No	New
RF789	MULTIPLE SURGERY EXCEPTION TABLE	PROVIDES A LISTING OF SURGERY HCPCS/CPT CODES WHICH ARE EXEMPTED FROM MULTIPLE SURGERY DISCOUNT LOGIC.	Evaluated annually; updated as needed; Infrequently	No	New
RF796	OPFS BUNDLED REVENUE CODES	PROVIDES A LISTING OF REVENUE CODES WHICH ARE BUNDLED UNDER QUALIFIED SURGERY OR EMERGENCY ROOM SERVICES ON OUTPATIENT CLAIMS AND ENCOUNTERS.	Evaluated annually; updated as needed; Infrequently	No	New
RF797	OPFS BUNDLED RATE DRIVER	PROVIDES A LIST OF HCPCS/CPT CODES WHICH QUALIFY FOR A SURGERY OR EMERGENCY ROOM SERVICES BUNDLING SITUATION ON OUTPATIENT CLAIMS AND ENCOUNTERS.	Evaluated annually; updated as needed; Infrequently	No	New

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RF739	OPFS BUNDLED EXCEPTION PROCEDURES	PROVIDES A LIST OF HCPCS/CPT CODES WHICH WHEN BILLED ON AN OUTPATIENT HOSPITAL CLAIM OR ENCOUNTER, REQUIRE EXCEPTION PROCESSING (SUCH AS NOT BEING SUBJECT TO SURGERY BUNDLING) AS DEFINED BY THE ACTION CODE.	Evaluated annually; updated as needed; Infrequently	No	New
RF721	REVENUE CODES	PROVIDES A LISTING OF ALL VALID UB REVENUE CODES.	Evaluated annually; updated as needed; Infrequently	No	Existing - no updates required to support O/P.
CL201	PRICING METHOD	A TABLE OF VALUES USED TO DEFINE THE ALLOWED AMOUNT CALCULATION ON A CLAIM.	As Needed; Infrequently	No	Existing - addition of new values
*	Relates to the Statewide Outpatient Cost to Charge (SCO) only				
**	Relates to coverage code '05' only				